ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			9-20 99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		69055	9-27-99

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
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Claim Final	Original	Date			Claim Final	Original	Date	Claim Final	Original	Date
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	2	✔ ✔			52			102		
	3	✔ ✔			53			103		
	4	✔ ✔			54			104		
	5	✔ ✔			55			105		
	6	✔ ✔			56			106		
	7	✔ ✔			57			107		
	8	✔ ✔			58			108		
	9	✔ ✔			59			109		
	10	✔ ✔			60			110		
	11	✔ O			61			111		
	12	✔ ✔			62			112		
2	13	✔ ✔ =			63			113		
	14	✔ ✔			64			114		
3	15	✔ ✔ =			65			115		
4	16	✔ ✔ =			66			116		
5	17	✔ ✔ =			67			117		
	18	✔ ✔			68			118		
	19	✔ ✔			69			119		
	20	✔ ✔			70			120		
	21	✔ ✔			71			121		
	22	✔ ✔			72			122		
	23	✔ ✔			73			123		
	24	✔ ✔			74			124		
	25	✔ ✔			75			125		
	26	✔ O			76			126		
	27	✔ ✔			77			127		
6	28	✔ ✔ =			78			128		
	29	✔ ✔			79			129		
7	30	✔ ✔ =			80			130		
8	31	✔ ✔ =			81			131		
	32				82			132		
	33				83			133		
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If more than 150 claims or 10 actions
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